New Hampshire Department of Agriculture, Markets & Food Bureau of Markets

AGRICULTURAL NUTRIENT MANAGEMENT GRANT PROGRAM

2003-2004 APPLICATION

		(Please type or print clearly)
1. Proje	ect Title:	
2. Appl	icant/Organization:	
(Contact Person:	
N	Mailing Address:	
(City:	State:Zip Code:
I	Home Telephone:	Work Telephone:
I	Fax:	Email:
_		
3. Gran	nt Amount Requested:	
4. Proje frame fo applicat water be structur	ect Description: (Whater project start and ention to be complete: I. odies and landforms; es and distances; III.	t do you intend to accomplish and how? Indicate time d dates.) You must attach the following for your A topographic map and/or aerial photo showing II. A project site map (may be hand drawn) showing Drawings, sketches or photos to help visualize
4. Proje frame fo applicat water be structur	ect Description: (Whater project start and ention to be complete: I. odies and landforms; es and distances; III.	t do you intend to accomplish and how? Indicate time d dates.) You must attach the following for your A topographic map and/or aerial photo showing II. A project site map (may be hand drawn) showing
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5. Itemized Budget: (Be as specific as possible, show costs by category: labor, materials, etc. Indicate what costs or tasks will be provided by the applicant.)
6. Applicant background/qualifications: (For on-farm projects list relevant information on operation, farm history, crop types, # acres, # animals and specie(s), present manure management practices, farm building details, etc.)
7. Objectives: (Describe how this project intends to meet the program's goals relative to agricultural nutrients and water quality concerns.) Indicate the distance in feet to nearby surface waters, names of streams, ponds if known.
8. Date:
9. Signature:

Return five (5) copies of the application to:

NH Department of Agriculture, Markets & Food Bureau of Markets - ANM Grant Program PO Box 2042 Concord, NH 03302-2042

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Email: runcles@agr.state.nh.us
Website: www.agriculture.nh.gov